

B. Specification

Please amend paragraph at page 1, line 19, to page 2, line 2, as follows:

--To do medical checkups ~~aiming~~ aimed at preventing diseases or ~~follow~~ following up on diseases by the laboratory tests, it is important or necessary to compare the results with the past test results. In physical examinations in companies or testing patients in hospitals, subjects are managed by identification numbers (ID numbers). For this reason, it is relatively easy to identify and specify a subject and refer to his/her past test results. However, if a false identification number is input in searching for a subject, the test results of another subject are ~~referred to~~ referenced.--

Please amend paragraph at page 2, lines 16-26, as follows:

--A name or date of birth is not sufficiently effective in identifying and specifying a subject because there is sometimes a person having the same name or the same date of birth. An address or telephone number can change ~~at times~~ over time and is therefore not sufficiently reliable in specifying a subject. If the subject is on the spot, his/her fingerprint, voiceprint, iris, or retinal pattern can be used to identify and specify him/her. With only a specimen, however, the subject cannot be identified and specified.--

Please amend paragraphs at page 3, line 4, to page 4, line 18, as follows:

--As media to record personal medical information, medical information cards made of an optical card, IC card, or magnetic card are used. Because of the nature of these cards that record medical information, it is impossible or difficult to rewrite data,

though a data write is possible. In inputting data to a medical information card, it is very important to confirm whether the holder of the card is an authentic person. This confirmation is done by collating the name, date of birth, photo of the face, or fingerprint data recorded on the medical information card. Although voiceprint, iris, and retinal patterns can also be used, they can be confirmed only when the person is on the spot.

However, in laboratory tests of blood, saliva, urine, and stool, data are often input without the presence of the person. Even when the person is present, the correspondence between the specimen and the subject is not always reliable. For this reason, data [[of]] pertaining to another person may erroneously be input onto the medical information card. That is, it is difficult to reliably collate the subject of a specimen with the holder of a medical information card by the conventional method. ~~It cannot be denied that~~ Undeniably, data [[of]] pertaining to another person may erroneously be input onto the medical information card.

It [[is]] has recently ~~becoming~~ become possible to diagnose cancers of certain types or examine the hepatic function by using a DNA microarray (also called a DNA chip) as one of the laboratory tests. It is expected that tests could be done in the future by using such DNA microarrays to diagnose various diseases or select treatment methods. However, even in tests using DNA microarrays, a number or a bar code is recorded on a DNA microarray itself by engraving and managed. Japanese Patent Laid-Open No. 2001-147231 proposes a technique of mounting an IC memory in a DNA microarray to store and manage the name, sex, number, and the like of a subject. However, neither a method of reliably identifying and specifying a subject corresponding to a DNA

microarray nor a method of reliably collating the holder of a medical information card with a subject in inputting test data to the card has been proposed.--

Please amend paragraph at page 4, lines 21-25, as follows:

--The present invention has been made in consideration of the above-described problems, and ~~has as~~ its object is to make it possible to reliably identify and specify a subject in testing the health conditions by using a DNA microarray.--

Please amend paragraph at page 6, line 24, to page 7, line 2, as follows:

--Other features and advantages of the present invention will be apparent from the following description taken in conjunction with the accompanying drawings, in which like reference characters designate the same or similar parts throughout the figures thereof.--

Please amend paragraph at page 10, line 12, to page 13, line 1, as follows:

--MHC genes are regions where immune system genes ~~[[most]]~~ concentrate most in the human genome and have received a great deal of attention because their base sequences have been clarified recently (Nature, Vol. 401, pp. 921-923, 1999). The sequences include genes related to compatibility/incompatibility determination in organ transplantation and bone marrow transfusion. Compatibility/incompatibility determination in organ transplantation and bone marrow transfusion is currently done by tests using leukocytes. However, the tests using leukocytes take a long time and can use only a

limited amount of information. For these reasons, it is expected that typing by MHC genes should be the mainstream in the future. MHC (HLA antigens for a human) includes three types of class I antigens, HLA-A, HLA-B, and HLA-C, and three types of class II antigens, HLA-DR, HLA-DQ, and HLA-DP.--